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MBS&S 919 854-1401

NO. 9025 P. 1/12

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Date: December 10, 2004

File Number: 5649-1228

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**To: Mail Stop Amendment
Examiner: Lynne Ann Gurley
Group Art Unit: 2812**

Company: United States Patent and Trademark Office

From: Elizabeth A. Stanek

**Number of Pages: 12
(including cover)**

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Attorney Docket No. 5649-1228

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Oh *et al.*

Confirmation No.: 4644

Application No.: 10/823,221

Group Art Unit: 2812

Filed: April 13, 2004

Examiner: Lynne Ann Gurley

For: **INTEGRATED CIRCUIT DEVICES HAVING PAD CONTACT PLUGS IN
THE CELL ARRAY AND PERIPHERAL CIRCUIT REGIONS OF THE
INTEGRATED CIRCUIT SUBSTRATE AND METHODS OF FORMING THE
SAME**

Date: December 10, 2004

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT in the above-identified patent application.

- ☐ Applicant claims small entity status. See 37 CFR §1.27.
☒ No additional fee is required.
☒ The fee has been calculated as shown below:

(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
Total	20	33	= 0	x 25=	\$	x 50=	\$.00
Indep	4	5	= 0	x100=	\$	x200=	\$.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+180=	\$	+360=	\$
				Total Add. Fee	\$	OR Total	\$.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Attorney Docket No.: 5649-1228
Application No.: 10/823,221
Filed: April 13, 2004
Page 2

- ☐ Please charge my Deposit Account No. 50-0220 in the amount of \$ ____ for ____.
- ☐ A check in the amount \$ _____ to cover _____ is enclosed.
- ☒ The Commissioner is hereby authorized to charge the appropriate fees associated with this communication or credit any overpayment to Deposit Account No. 50-0220.

Respectfully submitted,



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CERTIFICATION OF FACSIMILE TRANSMISSION UNDER 37 CFR § 1.8

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Erin A. Campion

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Attorney Docket No. 5649-1228

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Oh *et al.*

Serial No.: 10/823,221

Filed: April 13, 2004

For: **INTEGRATED CIRCUITS DEVICES HAVING PAD CONTACT PLUGS IN
THE CELL ARRAY AND PERIPHERAL CIRCUIT REGIONS OF THE
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**AMENDMENT AND RESPONSE TO
RESTRICTION REQUIREMENT**

Sir:

Applicants provide the present Amendment to address the issues raised in the Office Action mailed November 12, 2004.

If any extension of time for the accompanying Amendment and Response is required, Applicants request that this be considered a petition therefore. The Commissioner is hereby authorized to charge any additional fee, which may be required, or credit any refund, to Deposit Account No. 50-0220.

Amendments to the Title begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims, which begins on page 3 of this paper.

Remarks begin on page 9 of this paper.

In re: Oh *et al.*
Serial No.: 10/823,221
Filed: April 13, 2004
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Amendments to the Title:

Please replace the title with the following amended title:

**METHODS OF FORMING INTEGRATED CIRCUITS DEVICES HAVING
PAD CONTACT PLUGS IN THE CELL ARRAY AND PERIPHERAL
CIRCUIT REGIONS OF THE INTEGRATED CIRCUIT SUBSTRATE AND
~~METHODS OF FORMING THE SAME~~**